

# 2011 BRITTLEBANK BARRACUDAS



Phone: 812-838-4586 or Fax: 812-838-8728

- Children through the age of 18 and able to swim at least the requirements for Level 3 are eligible.
- There is no fee for joining the Barracuda Team. Admission into the pool for practices will be the only cost. (Family and Single passes are available for the entire 2011 season, preseason sale April 25<sup>th</sup>-May 27<sup>th</sup>). There are nominal entry fees for swim meets. Team suits will be available, but not required.

Practices are held on the following schedule:

Monday - Thursday 8:30 - 9:30am and 5:30 - 6:30 pm

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Gender: M F

Was your child enrolled in a swimming class at Brittlebank last session? \_\_\_\_\_

If yes, what Level was achieved? \_\_\_\_\_

## PARENT PERMISSION:

**(Both parents must sign this permission form. If only one parent is available to sign, the parent signing must assume complete and absolute responsibility as set forth below)**

We/I hereby grant permission for my child \_\_\_\_\_ to participate on the Barracuda Swim Team.

We/I represent that my child is physically fit and suffers from no health issue which would prevent him/her from participating in this activity. We/I will assume all responsibility and obligation for my child in case of injury or accident sustained during participation in this program. We/I release and hold harmless the Mt. Vernon Parks & Recreation Board, employees of the Mt. Vernon Parks Board, and all other paid and volunteer personnel from any and all liability, loss, damage, injury which may result or occur during the course of this sports program. We/I give permission for the Mt. Vernon Park & Recreation Department to use individual photographs and team photographs as the department sees fit, including but not limited to, print and internet publication. We/I will work together with the Mt. Vernon Park & Recreation Department and all persons involved in this sports program to build a fine program for all of the youths involved

_____ Date	_____ Parent Signature	_____ Printed Name
_____ Date	_____ Parent Signature	_____ Printed Name

Phone #'s h) \_\_\_\_\_ w) \_\_\_\_\_ emergency) \_\_\_\_\_ Email \_\_\_\_\_  
(PR use only)